REQUEST FOR SEWER FEE ADJUSTMENT
City of Goodyear
Water Management Department
P.O. Box 5100
Goodyear, AZ 85338-0601

The information provided on this form will be used to adjust your sewer fee for water consumption that is not disposed of through the City's wastewater collection system. Sewer Fees are based on your average water consumption for the winter months billed in January, February and March of this year. If you believe the water consumption for these three months is a misrepresentation of your water that is disposed of through the City's wastewater collection system, please complete the following information. If your monthly average consumption is less than 2400 gallons per familiy member, per month, the fee rate will not be adjusted and this form need not be completed or returned to the City.

1. Customer Information

NAME: _____   ACCOUNT #: _____

ADDRESS:_____   HOME PHONE#: _____

CITY/STATE/ZIP: Goodyear, AZ 85338   WORK PHONE#: _____

WINTER AVERAGE: _____
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2. Water Usage Information:

1. Number of Occupants in Household: _____
2. Winter Lawn (square footage) _____ Sq. ft.
3. Garden (square footage) _____ Sq. ft.
4. Number of Trees: _____ Total
5. Number of Shrubs: _____ Total
6. Size of Pool, Spa, Fountains or Ponds: _____ Sq. ft.

7. Leaks repaired during January, February & March
(Actual receipts for materials purchased and/or work done MUST be attached)   Yes: _____ No: _____

   7a. Estimated leakage in gallons/month _____ Gallons

8. Pool filled or repairs made during winter months
listed above: (Actual
documentation & proof of gallons needed to fill pool MUST be attached)   Yes: _____ No: _____

   8a. Number of gallons due to repair _____ Gallons

9. Livestock - Number of livestock on property _____ Total

3. Other Comments:

_____

_____

The above information is accurate to the best of my knowledge. I understand that the given values are subject to verification and if there is an error, I will be charged for any incorrect allowance not previously billed. Any allowances, based on the information provided will be reflected in future bills. Any questions can be answered by our Finance Department at (623) 932-3015.

SIGNATURE: _____   DATE: _____

APPROVED BY: _____   DATE: _____
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